Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column						mn 2)	SMALL ENTITY TYPE			OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			5					RATE	FEE	· [	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			SIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			ち minus 20=		*		×	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			A minus 3 =		*		>	<42=	42	OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					140=		OR	+280=	
* If	the difference	less than ze	es than zero, enter "0" in column 2			T(	TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II											OTHER	
		(Column 1)		(Column HIGHES				MALL	NTITY OR		SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=	×	(\$ 9=		OR	X\$18=	
AME	Independent	ependent		T CL AIRA	=		<b>(</b> 42=		OR	X84=		
Ш	FINST PRESE	NIATION OF W	JLI IFLE DEI	PENDEN	CLAIIVI		+	140=		OR	+280=	
								TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)							/11. FCC			AUDII. FEE	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM	HEST IBER OUSLY	PRESENT '	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**	1	=	×	(\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	<b>-</b> 01	<u> </u>	>	<42=		OR	X84=	
ب		NTATION OF MI	JLTIPLE DEI	PENDENT	CLAIM		J	140=		OR	+280=	
1,2,4,5							L	TOTAL		OD	TOTAL	
		(Column 1)		(Colu	mn 2)	(Column 3)	ADE	OIT. FEE			ADDIT. FEE	<u> </u>
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	-	=	] [×	(\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		(42=		OR	X84=	
<u>.</u>	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDENT		T CLAIM	CLAIM		140	1 10		.000	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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